2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005
Secretary of State

DOCUMENT# P04000143937

Entity Name: RATCLIFF DESIGN AND RENOVATIONS INC.

Current Principal Place of Business:

5239 COUNTY ROAD 125 B1
WILDWOOD, FL 34785

New Principal Place of Business:

9552 SE 170TH PL
SUMMERFIELD, FL 34491

Current Mailing Address:

5239 COUNTY ROAD 125 B1
WILDWOOD, FL 34785

New Mailing Address:

9552 SE 170TH PL
SUMMERFIELD, FL 34491

FEI Number: 20-1776211 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RATCLIFF, TRACY L
5239 COUNTY ROAD 125 B1
WILDWOOD, FL 34785 US

Name and Address of New Registered Agent:

RATCLIFF, TRACY L
9552 SE 170TH PL
SUMMERFIELD, FL 34491 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____ 04/28/2005
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: RATCLIFF, TRACY L
Address: 5239 COUNTY ROAD 125 B1
City-St-Zip: WILDWOOD, FL 34785

Title: VP ( ) Delete
Name: RATCLIFF, KAREN M
Address: 5239 COUNTY ROAD 125 B1
City-St-Zip: WILDWOOD, FL 34785

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: RATCLIFF, TRACY L
Address: 9552 SE 170TH PL
City-St-Zip: SUMMERFIELD, FL 34491

Title: VP (X) Change ( ) Addition
Name: RATCLIFF, KAREN M
Address: 9552 SE 170TH PL
City-St-Zip: SUMMERFIELD, FL 34491

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TRACY RATCLIFF P 04/28/2005
Electronic Signature of Signing Officer or Director — Date